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WASHINGTON MEDICAID INTEGRATION PROJECT ADJUSTS IMPLEMENTATION SCHEDULE IN SNOHOMISH COUNTY

EVERETT – The state will redraft part of a Snohomish County pilot project aimed at coordinating care and improving health-care outcomes by integrating different Medicaid-funded services, according to the Washington Department of Social and Health Services (DSHS).

DSHS Secretary **Dennis Braddock** announced the changes today (Thursday, August 12) in a letter to Snohomish County officials who have been working in an advisory capacity on the Washington Medicaid Integration Partnership (WMIP) project. Braddock said the changes will help ensure that clients and providers have enough time for a smooth transition between care systems.

Ultimately, WMIP will bring together funding for integrated medical, chemical dependency, mental health and long-term care services – all now provided by different parts of DSHS, sometimes under different rules and requirements. Under WMIP, all those services will be better centered on a client's needs, beginning with the certainty of a primary care provider, who would be assigned to WMIP clients by a managed care health plan contractor.

“Many of these clients currently do not have a regular doctor and lack a ‘medical home’ to coordinate their different care needs and make sure necessary treatments and services do not fall through the cracks,” Braddock said.

The two major changes announced Thursday are:

- The project now will include both outpatient and inpatient mental health coverage. Previously, only outpatient coverage was included.
- WMIP timeline for implementation of mental health services will be adjusted to make sure that it builds in an orderly and confusion-free transition for mental health clients, many of whom are elderly and disabled.

“These changes will not interfere with implementation of WMIP’s medical and chemical dependency components on schedule – January 1, 2005,” Braddock said. Long-term care services had been tentatively scheduled for implementation in July of 2005, and Braddock said delay in adding mental

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health services might have a secondary payoff by giving the project a better chance to integrate mental health and long-term care at the same time.

Braddock thanked the Snohomish County providers, health-care representatives, clients and stakeholders who have been working with DSHS to identify potential concerns about the implementation. He acknowledged that there is still community concern in some quarters about how the funding for the project would impact other mental health services, which are traditionally provided by a Regional Support Network (RSN). The five-county RSN in Northwest Washington is the North Sound Mental Health Association (NSMHA), and Braddock stressed that the funding would be divided proportionately with the client base involved with WMIP.

“It is always uncomfortable to implement change,” Braddock noted, “but the current care system is not the last word in effective health care or efficiency. Our clients deserve improvements that will better focus on and address their medical, long-term care, alcohol and drug treatment, and mental health needs. At the same time, our stakeholders, policymakers and taxpayers deserve a system that is creative, effective and accountable – securing the best value for every dollar we spend.”

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FOR MORE INFORMATION AND BACKGROUND:

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